# EXHIBIT XVI-D-3
## FEDERAL FUND REVENUE EXAMPLE

STATE OF CALIFORNIA
**REPORT TO STATE CONTROLLER**
**OF REMITTANCE TO STATE ACCOUNT**
TC - 47

| CHECKING ACCOUNT NO. | REMITTANCE ADVICE NO. |
|---|---|
| **111** | **R** **11111** |

| AGENCY: | FOR CREDIT TO: (FUND) | APPROPRIATION DATA: |
|---|---|---|
| **DEPARTMENT OF AIR QUALITY** | **0890 FEDERAL TRUST FUND** | **Federal Receipts** |

| FUND | AGY | FY | M | REF / ITEM | FED CAT | P / N | C | CAT | PGM | ELE | COMP | TASK | ACCT | | REV / OBJ | AMOUNT | D C | DESCRIPTION | SOURCE FUND |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **0890** | **9990** | **20nn** | | **101** | **84007** | **01** | **2** | **90** | | | | | | | **484007** | **1,500.00** | | **Clean Air Grant** | |
| **0890** | **9990** | **20nn** | | **101** | **84116** | **02** | **2** | **90** | | | | | | | **484116** | **1,000.00** | | **Yolo Air Grant** | |
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| | | | | | | | | | | | | | | | | **TOTAL** **2,500.00** | | | |

TO STATE CONTROLLER: I hereby certify that the foregoing report is a correct statement of all monies received by the above named agency and on account of said Fund or Appropriation during the periods stated below in accordance with Section 12418 of the G

(Signed)

OFFICIAL TITLE
**Accounting Administrator**

DATE
**10/5/nn**

CONTACT
**John Doe**

PHONE
**(916) 445-9999**

Collection period from **September 30, 20nn** to **September 30, 20nn** inclusive.

EXHIBIT XVI-D-4
POSTING TAG FOR FEDERAL FUND REVENUE RA

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter F09**. TC F09 debits GL 1115 and credits GL 1110. |
| FFY | **Enter the year to which the Revenue applies**. |
| VENDOR/S (Vendor Number/Suffix) | **Enter the Vendor Number** for the State Treasurer's Office. |
| DOC DATE (Current Document Date) | **Enter the last date of the collection period** on the RA. This ensures that the remittance transaction is posted correctly on the H03/H05 Reports. |
| CUR DOC/S (Current Document/Suffix) | **Enter the RA number** (Rxxxxx) from the Remittance Advice box on the Form CA-21A. |
| INDEX | **Optional field - Enter the appropriate Index**. Refer to the H03 Report. |
| PCA | **Optional field** - **Enter the appropriate PCA**. Refer to the H03 Report. |
| AMOUNT | **Enter the remittance amount**. |
| PROJECT/WP (Work Phase) | **Enter the appropriate 6-digit Project and 2-digit Work Phase**, if applicable. |
| SOURCE/AS | **Enter the 6-digit UCM Receipt Code**. The first digit is receipt type 4. The following five digits are the Federal Catalog Number. (The Federal Catalog Number must agree with the 5-digit number in the FED CAT block. |
| CHECK | First 3 digits - **Enter the 3-digit bank account number** from the Checking Account No. box on the RA.<br><br>Fourth digit – **Enter R.**<br><br>Last 5 digits – **Enter the 5-digit agency assigned number** from the Remittance Advice box on the RA. |
| APPN SYM (Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE (Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| FUND/DTL (Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| ITEM | Description. |
| DUE DATE | **Enter the date** the RA is prepared and/or faxed to SCO. |

EXHIBIT XVI-D-8
POSTING TAG FOR FEDERAL FUND REVENUE RA – 44 ACCOUNT ONLY

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter TC F09**.  TC F09 debits GL 1115 and credits GL 1110. |
| FFY | **Enter the year to which the Revenue applies**. |
| VENDOR/S (Vendor Number/Suffix) | **Enter the Vendor Number** for the State Treasurer's Office. |
| DOC DATE (Current Document Date) | **Enter the last date of the collection period** on the RA.  This ensures that the remittance transaction is posted correctly on the H03/H05 Reports. |
| CUR DOC/S (Current Document/Suffix) | **Enter the RA number** (Rxxxxx) from the Remittance Advice box on the Form CA-21A. |
| INDEX | **Optional field - Enter the appropriate Index**.  Refer to the H03 Report. |
| PCA | **Optional field - Enter the appropriate PCA**.  Refer to the H03 Report. |
| AMOUNT | **Enter the remittance amount**. |
| PROJECT/WP (Work Phase) | **Enter the appropriate 6-digit Project and 2-digit Work Phase**, if applicable. |
| SOURCE/AS | **Enter the 6-digit UCM Receipt Code**.  The first digit is receipt type 4.  The following five digits are the Federal Catalog Number.  (The Federal Catalog Number must agree with the 5-digit number in the FED CAT block. |
| CHECK | First 3 digits - **Enter the 3-digit bank account number** from the Checking Account No. box on the RA.<br><br>Fourth digit – **Enter R.**<br><br>Last 5 digits – **Enter the 5-digit agency assigned number** from the Remittance Advice box on the RA. |
| APPN SYM (Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE (Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| FUND/DTL (Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| ITEM | Description. |
| DUE DATE | **Enter the date** the RA is prepared and/or faxed to SCO. |

EXHIBIT XVI-D-9
POSTING TAG FOR CONTROLLER'S RECEIPT JOURNAL ENTRY (CRAnnnnnn)
FOR FEDERAL FUND REVENUE RA – 44 ACCOUNT ONLY

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter TC 127**.<br>TC **127** debits GL 1140 and credits GL 1115. |
| FFY | **Enter the appropriate year.** |
| DOC DATE (Current Document Date) | **Enter journal entry (CRA) date.** |
| CUR DOC/S (Current Document/Suffix) | **Enter the JE number (CRAxxxxxx).** |
| INDEX | **Enter the same information that was used to post the RA (TC F09)**. |
| PCA | **Enter the same information that was used to post the RA (TC F09)**. |
| AMOUNT | **Enter the remittance amount**. |
| SOURCE/AS | **Enter the same information that was used to post the RA (TC F09)**. |
| APPN SYM (Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE (Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |
| FUND/DTL (Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |

# EXHIBIT XVI-D-11  --  FEDERAL FUNDS (REVERTED APPROPRIATION) EXAMPLE

STATE OF CALIFORNIA
**REPORT TO STATE CONTROLLER
OF REMITTANCE TO STATE ACCOUNT**
TC - 47

| CHECKING ACCOUNT NO. | REMITTANCE ADVICE NO. | |
|---|---|---|
| **333** | **R** | **33333** |

| AGENCY: | FOR CREDIT TO: (FUND) | APPROPRIATION DATA: |
|---|---|---|
| **DEPARTMENT OF AIR QUALITY** | **0890 FEDERAL TRUST FUND** | |

| FUND | AGY | FY | M | REF / ITEM | FED CAT | P/N | C | CAT | PGM | ELE | COMP | TASK | ACCT | SCO | REV / OBJ | AMOUNT | D C | DESCRIPTION | SOURCE FUND |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **0890** | **9990** | **1944** | | | **84063** | **01** | **2** | | | | | | | | **484063** | **10,000.00** | | **Clean Air Grant** | |
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| | | | | | | | | | | | | | | | | | **TOTAL** | **10,000.00** | | | |

TO STATE CONTROLLER:  I hereby certify that the foregoing report is a correct statement of all monies received by the above named agency and on account of said Fund or Appropriation during the periods stated below in accordance with Section 12418 of the G

(Signed)

OFFICIAL TITLE

**Accounting Administrator**

DATE

**10/5/nn**

| CONTACT | PHONE |
|---|---|
| **John Doe** | **(916) 445-9999** |

Collection period from **September 1, 20nn** to **September 30, 20nn** inclusive.

CA 21A  (11-2004)  PC Excel 97 Version

*Original - State Controller's Office   Duplicate - Agency Copy*

EXHIBIT XVI-D-12
POSTING TAG FOR FEDERAL FUNDS (REVERTED APPROPRIATION) RA

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter TC F10**. TC F10 debits GL 1115 and credits GL 1110. |
| FFY | **Enter the year to which the Revenue applies**. |
| VENDOR/S<br>(Vendor Number/Suffix) | **Enter the Vendor Number** for the State Treasurer's Office. |
| DOC DATE<br>(Current Document Date) | **Enter the last date of the collection period** on the RA. This ensures that the remittance transaction is posted correctly on the H03/H05 Reports. |
| CUR DOC/S<br>(Current Document/Suffix) | **Enter the RA number** (Rxxxxx) from the Remittance Advice box on the Form CA-21A. |
| INDEX | **Optional field – Enter the appropriate Index**. Refer to the H03 Report. |
| PCA | **Optional field – Enter the appropriate PCA**. Refer to the H03 Report. |
| AMOUNT | **Enter the remittance amount**. |
| PROJECT/WP<br>(Work Phase) | **Enter the appropriate 6-digit Project and 2-digit Work Phase**, if applicable. |
| SOURCE/AS | **Enter the 6-digit UCM Receipt Code**. The first digit is receipt type 4. The following five digits are the Federal Catalog Number. (The Federal Catalog Number must agree with the 5-digit number in the FED CAT block. |
| CHECK | First 3 digits - **Enter the 3-digit bank account number** from the Checking Account No. box on the RA.<br>Fourth digit – **Enter R.**<br>Last 5 digits – **Enter the 5-digit agency assigned number** from the Remittance Advice box on the RA. |
| APPN SYM<br>(Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE<br>(Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| FUND/DTL<br>(Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| DUE DATE | **Enter the date** the RA is prepared and/or faxed to SCO. |

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter TC F09**.  TC F09 debits GL 1115 and credits GL 1110. |
| FFY | **Enter the year to which the Revenue applies**. |
| VENDOR/S<br>(Vendor Number/Suffix) | **Enter the Vendor Number** for the State Treasurer's Office. |
| DOC DATE<br>(Current Document Date) | **Enter the last date of the collection period** on the RA.  This ensures that the remittance transaction is posted correctly on the H03/H05 Reports. |
| CUR DOC/S<br>(Current Document/Suffix) | **Enter the RA number** (Rxxxxx) from the Remittance Advice box on the Form CA-21A. |
| INDEX | **Optional field - Enter the appropriate Index**.  Refer to the H03 Report. |
| PCA | **Optional field - Enter the appropriate PCA**.  Refer to the H03 Report. |
| AMOUNT | **Enter the remittance amount**. |
| PROJECT/WP<br>(Work Phase) | **Enter the appropriate 6-digit Project and 2-digit Work Phase**, if applicable. |
| SOURCE/AS | **Enter the 6-digit UCM Receipt Code**.  The first digit is receipt type 4.  The following five digits are the Federal Catalog Number.  (The Federal Catalog Number must agree with the 5-digit number in the FED CAT block. |
| CHECK | First 3 digits - **Enter the 3-digit bank account number** from the Checking Account No. box on the RA.<br>Fourth digit – **Enter R.**<br>Last 5 digits – **Enter the 5-digit agency assigned number** from the Remittance Advice box on the RA. |
| APPN SYM<br>(Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE<br>(Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| FUND/DTL<br>(Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9. |
| ITEM | Description. |
| DUE DATE | **Enter the date** the RA is prepared and/or faxed to SCO. |

EXHIBIT XVI-D-17
POSTING TAG FOR CONTROLLER'S RECEIPT JOURNAL ENTRY (CRAnnnnnn)
FOR ABATEMENT – AVAILABLE APPROPRIATION

| FIELD NAME | INFORMATION |
|---|---|
| TC | **Enter TC F25** for Revenue.<br>TC **F25** debits GL 1140 and credits GL 1115. |
| FFY | **Enter the appropriate year.** |
| DOC DATE (Current Document Date) | **Enter journal entry (CRA) date.** |
| CUR DOC/S (Current Document/Suffix) | **Enter the JE number (CRAxxxxxx)**. |
| INDEX | **Enter the same information that was used to post the RA (TC F09).** |
| PCA | **Enter the same information that was used to post the RA (TC F09).** |
| AMOUNT | **Enter the remittance amount**. |
| SOURCE/AS | **Enter the same information that was used to post the RA (TC F09).** |
| APPN SYM (Appropriation Symbol) | Required only if PCA is not entered. |
| FUND SRCE (Fund Source) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |
| FUND/DTL (Fund/Fund Detail) | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |
| METHOD | Required only if PCA is not entered.<br>Refer to the PCA Table through Command I.9 or refer to the TC **F09** entry. |